	P	ATEN	TAPP	LICATI	ON FEE	DF.	FERMINAT	IOA	PECAR	e) for medical	umers a	lepte	ye e veld OM	8 con	toun los
<b>-</b>		<del></del>	<del></del>	. Sub	iditute for	Form	PTO-875 E	flect	ve Decembe	18,2004	^~	Pica 1'C	100 or Docker	<b>٠</b> –	3
		APPL	ICATIC	N AS F	ILEO - F	PART					•	. /		O.	£
(Column 1).						(Column 2)			SMALL ENTITY			)R	OTH! SMAL	ERT	
FOR NUMBER FILED					FD.	. МП	ABER EXTRA					ſ	SMAC	- CIV	
B	ASIC FEE 7 CFR 1 16(4) (b)	N/A ·			N/A		-	RATE (S)			I	RATE (1)		FEE (1)	
- 8	EARCHFEE	N/A			NIA		-	HVA	150.0		- 1	N/A	30	00.00	
E	CFR 1 16(N. 14.	N/A		<del></del>	· .		4	NVA .	\$250			: N/A	\$	500	
PAT CFR-1, 16(0), (p), or (q)) TOTAL CLAIMS			W				MIÝ.	4	NVA	\$100		$\cdot$	. H/A	\$	200
<b>P7.CFR (46(1))</b>			minus 20 e						X\$ 25	•		<sub>R</sub>	X\$50 .	, ]	:
MDEPENDENT CLAIMS DI CFR 1 16(N)			= £ sunm						X100				X200 .	<del>    -</del>	<u></u>
AF	PLICATION SU	76	If the specification and draw sheets of paper, the applica			SUMB	exceed 100	1	<b> </b>	1		ŀ		┪—	<del></del>
FEE . \$7 CFR 1 16(4))			is \$250 (\$125 for small additional 50 sheets or f			entity) for each		11	ŀ		;	-		1	•
***	O. 11 10/411		35 U.S	nai 50 sh .C. 41(a)	eels or fra (1)(G) and	iclion i 137 C	hereof. See FR:1,16(s).		•			-  -			
MÌ	NITIPLE DEPEN	7	+180=	1	-	-  -	+360×	<del>- </del>							
•#	the difference is	n polymn	1 is less t	han zero	enter TO' in	colum		<b></b> . 1	TOTAL			با		┥┯	
	•			•					· IOIAL	<u> </u>	ا ال	i.	TOTAL .	<u></u>	
	API	LICA	ION AS	AMEN	DED - P	ARTI	į	-	•						
	<del></del>		luma 1)		(Col.	/mn 2)	(Column 3)	٤.	SMALL	ENTITY	Ó	R	OTHER	i TH	M,
¥	Coloila	REA	LAIMS MAINING	1	HOH		PRESENT	7 1	RATE (1)	A001/		Г	SMALL		
	AME		FTER NOMENT		PREVIOUSLY PAID FOR		EXTRA	11	10/12/0	TONAL FEE (\$1)			RATE (\$).	T	10/1AL
AMENDMENT	CI CER LINIA	O(S)		Minus	20		1.		X\$.25 .	1		1,	<b>(\$5</b> 0	-5	EE (I)
Z	Independent . FIT CFR E. 18/11	L	· .:	Minus		)	1.0		X100 _	/	OR	-	cono	<sub> </sub>	
3	Application Stre Fee (37 CFR 1.16(s))									<del>                                     </del>	- OR	-		<i> </i>	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (DT CFR 1.160)								<b>+180</b> =		OR		+360=	1.	
			•		•			, <del>)</del> -	TOTAL ADD'L FEE	-	7	L	OTAL.	1	
•		Colu	mn 1)		. (Colu	ma 21	Continue of		-COCTEE	<del></del>	J OR	· Al	DO'L FEE		
П	*****	a	AIMS .	<u> </u>	HIGHE	\$1	(Column 3)	Ė	<del> </del>	<del> </del>	7	<u></u>	<del></del>	<u>.</u>	
AMENDINEIN S	•	AF	aining Ter.	*:	PREVIO	USLY	PRESENT EXTRA		RATE (1)	ADDI- TIONAL	1	'	RATE (\$)		DOI-
5	Total	AMEN	DMENT	Minus	PAID F	OR	5	-		FEE (S)	-  '	ļ			E-(2) XNAT
5	du ben Froin	•		Minus ·	***			-	X\$ 25 _		OR .	×	\$50 -		
1	Application Str	4 Fee (3)	CER 1 1		<del></del>			-	X100 _		OR	1×	200		
	Application Size Fee (37 CFR 1.16(s))  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1))									·	4	-			
J.		L	+180=		OR	<u></u>	360=								
_	*			٠.				A	OTAL DD1 FEE		OR		TAL D'L'FEE		
	RUM TINNESTA	umbar P	YAYIMIRKNI	Paid Facil	IN THIS SE		"O" in column 3.	-14	in in	•	<b>.</b> .				
4	иканови они	unither P	MOVIMUEDY F	PAMFACI	N THIS CO	ACEL	leasthan 9 and	444			•			•	
8	ection of Inform	ration is	required t	w 37 CFF	1.16. The	ndon	nd) is the highest	dia	per tound in the	e appropria	e box in c	olum	n 1	منوبنسيط	

i colection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to process) an application. Confidentiality is governed by 35 U.S.O. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments is amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent Trademark Office, U.S., Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS RESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.